



Zancor Homes (Innisfil) Ltd.
Warranty Services
Phone: (905) 833-1359
Fax: (905) 833-4367

Work Order

Closing Date: 01Mar18

Address: 937 Cole Street - Innisfil
Location: Belle Aire Shores - Phase: 1 - Lot: 137
Today's Date: 29Mar18
Contact(s): Dani Mishayev - Cell: (416) 471-6363
Email: dani@mishaysolutions.com

Company: Tub Net
Attention: Anthony
Telephone: (416) 823-6999
Fax: (905) 873-7738

Please Complete the following items:

Deficiency Number	Type	Issue	Appt. Date/Time	Notes
123795	PDI	Shared Ensuite- crack on tub skirt		

Date Completed: MAR 15 / 2018 Homeowner Signature: _____
The Homeowner acknowledges and accepts all work has been completed in a workman like manner.

Date Completed: MAR 15 / 2018 **Trade &/or Service Tech.**
Signature: _____
Print Name: _____

Please schedule your Service Department to complete work on the above Lot. Should no appointment time or date appear (below) on this form, it is your responsibility to arrange and adhere to the appointment you have scheduled. Your service representative must have this form signed by homeowner on completion. Please fax the signed form to our office (905) 833-4367.

Failure to comply with this request within 10 business days will give Zancor Homes (and it's group of companies) the right to carry out any and all repairs. All costs incurred will be applied to the Company listed above.



Zancor Homes (Innisfil) Ltd.
Warranty Services
Phone: (705) 294-1740
Fax: (705) 294-1741

Work Order

Closing Date: 01Mar18

Address: 937 Cole Street
Innisfil, ONTARIO

Location: Belle Aire Shores - Phase: 1 - Lot: 137

Today's Date: 12Jul19

Contact(s): Chantel Anderson - Cell: (647) 621-3753

Email: chantelanderson712@gmail.com

Company: Smart Tech Systems LTD.

Attention: Rob Mazzei Cell # 416.786.8455

Telephone: (905) 761-6469

Fax: (905) 761-7384

Please Complete the following items:

DAI	Type	Issue	Appt. Date/Time	Notes
136018	1 Year	Other- General- Vacuum holes require covers		

Date Completed:

June 16/19

Homeowner Signature: [Signature]
The Homeowner acknowledges and accepts all work
has been completed in a workman like manner.

Date Completed: _____

Trade &/or Service Tech.

Signature: _____

Print Name: _____

Please schedule your Service Department to complete work on the above Lot. Should no appointment time or date appear (below) on this form, it is your responsibility to arrange and adhere to the appointment you have scheduled. Your service representative must have this form signed by homeowner on completion. Please fax the signed form to our office (905) 833-4367.

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